OMB#: 2050-0028 Expires 06/30/2009

SEND COMPLETED FORM TO:	United States Environmental Protection Agency					
The Appropriate State or EPA Regional Office.	RCRA SUBTITLE C SITE IDENTIFICATION FORM					
1. Reason for	Reason for Submittal:					
Submittal (See instructions on page 13.)	☑ To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)					
on page 10.,	☐ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information)					
MARK ALL BOX(ES) THAT APPLY	☐ As a component of a First RCRA Hazardous Waste Part A Permit Application					
IIIAI AITEI	☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #)					
	☐ As a component of the Hazardous Waste Report					
2. Site EPA ID	EPA ID Number	151				
Number (page 14)	EPA ID Number I A B O O O O S 1 1 0 1 1 5 6 1					
3. Site Name (page 14)	Name: TPI lowa, LLC					
4. Site Location	Street Address: 2300 N. 33rd Avenue East					
Information (page 14)	City, Town, or Village: Newton	State: IA				
	County Name: Jasper	Zip Code: 50208				
5. Site Land Type (page 14)	Site Land Type: ☑ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other					
6. North American Industry	A.   B.					
Classification System (NAICS) Code(s) for the Site (page 14)	C. D					
7. Site Mailing	Street or P. O. Box: 2300 N. 33rd Avenue East					
Address (page 15)	City, Town, or Village: Newton		- 486235 - 			
	State: IA 641-791- 3522 RCRA					
	Country: USA	<b>Zip Code:</b> 50208				
8. Site Contact	First Name: David	Last Name: Lloyd				
Person (page 15)	Phone Number: 401-247-4096 Extension:	Email address: dlloyd@tpicompos	Email address: dlloyd@tpicomposites.com			
Operator and     Legal Owner	A. Name of Site's Operator: TPI lowa, LLC	<b>Date Became Oper</b> 07/25/2008	Date Became Operator (mm/dd/yyyy): 07/25/2008			
of the Site	Operator Type: ☑ Private ☐ County ☐ District ☐ Federal ☐ Indian ☐ Municipal ☐ State ☐ Other					
(pages 15 and 16)	B. Name of Site's Legal Owner:	Date Became Own	er (mm/dd/yyyy):			
	OPUS Northwest, LLC	11/01/2 DECD PE	11/01/2007 DECP RECEIVED			
	Owner Type:  Private  County District Federal Indian Municipal State Other					
EPA Form 8700-12	2 (Revised 7/2006) DANNING data entered	AUG 1	Page 1 of 3			

by State on 8 22 8

EPA ID NO:				OMB#: 2050-0028 Expires 06/30/2009		
9. Legal Owner	Street or P. O. Box: 10350 Bren Road West					
(Continued) Address	City, Town, or Village: Minnetonka					
	State: MN					
	Country: USA			<b>Zip Code</b> : 55343		
10. Type of Regulated Mark "Yes" or "No		plete any additional boxes a	as instructed.	(See instructions on pages 17 to 20.)		
A. Hazardous Wa Complete all p	ste Activities arts for 1 through 6.					
Y☑ N□ 1. Generator			Y□ N☑ 2	. Transporter of Hazardous Waste		
If "Yes", choose only one of the following a. LQG: Greater than 1,000 kg/mc of non-acute hazardous v		mo (2,200 lbs./mo.) s waste; or	Y□ N☑ 3.	B. Treater, Storer, or Disposer of Hazardous Waste (at your site) Note: A hazardous waste permit is required for this activity.		
	6: 100 to 1,000 kg/mo (22 of non-acute hazardou	s waste; or	Y□ N☑ 4	. Recycler of Hazardous Waste (at your site)		
c. CESQG: Less than 100 kg/mo (220 lbs./mo.) of non-acute hazardous waste			Y□ N☑ 5	. Exempt Boiler and/or Industrial Furnace If "Yes", mark each that applies.		
In addition, indicate other generator activities.				<ul> <li>a. Small Quantity On-site Burner</li> <li>Exemption</li> <li>b. Smelting, Melting, and Refining</li> </ul>		
Y□ N☑ d. United States Importer of Hazardous Waste						
Y□ N☑ e. Mix	ed Waste (hazardous and	radioactive) Generator	Y□ N☑ 6	. Underground Injection Control		
B. Universal Waste Activities		C. Used Oil Activities  Mark all boxes that apply.				
Y N 1. Large Quantity Handler of Universal Waste (accumulate 5,000 kg or more) [refer to your State regulations to determine what is regulated]. Indicate types of universal mark all boxes that apply:  Manage		Y☐ N☑ 1. Used Oil Transporter  If "Yes", mark each that applies. ☐ a. Transporter ☐ b. Transfer Facility				
a. Batteries b. Pesticide c. Mercury o	s containing equipment		Y□ N☑ 2.	Used Oil Processor and/or Re-refiner If "Yes", mark each that applies.  a. Processor b. Re-refiner		
d. Lamps e. Other (sp	ecify)		Y□ N☑ 3.	Off-Specification Used Oil Burner		
g. Other (sp	ecify)ecify)ecify)ecify)ecify)en Facility for Universal \( \)			Used Oil Fuel Marketer If "Yes", mark each that applies.  ☐ a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner ☐ b. Marketer Who First Claims the		
<b>Note:</b> A hazardous waste permit may be required for this activity.			Used Oil Meets the Specifications			

PA ID NO:		!			OMB#: 2050-0028	Expires 06/30/200
11. Description	on of Hazardous Wastes	(See instruction	ns on page 21.)			
handled	Codes for Federally Regi at your site. List them in al page if more spaces are	the order they are				
-003	D001					
hazardo	Codes for State-Regulate us wastes handled at you aces are needed for waste	r site. List them in				
			2			
2. Comment	ts (See instructions on p	page 21.)	<u></u>	<u> </u>		
×						
n accordance in my inquiry of information sul inenalties for si	ion. I certify under penalt with a system designed to of the person or persons whitted is, to the best of nubmitting false information Hazardous Waste Part A	o assure that qual who manage the s ny knowledge and n, including the po	ified personnel prop system, or those pers I belief, true, accurat ssibility of fine and i	erly gather and eva sons directly respor e, and complete. I a mprisonment for kn	luate the information asible for gathering the am aware that there a cowing violations.	submitted. Based the information, the tare significant
	ons on page 21.)  operator, owner, or an	Name and Offi	icial Title (type or p	print)		Date Signed
uthorized re	presentative					(mm/dd/yyyy)
Mu	TOM	Crugar Tuttle	, General Manage	er - TPI Iowa, LL0	C	My 11, 2
EPA Form 87	700-12 (Revised 7/2006	3)				Page 3 of